Docket No. DI-5829

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## SYSTEMS AND METHODS FOR PERITONEAL DIALYSIS

		(D MEINOD		21212
the spe	ecification of which: (c	heck one)		
X	is attached hereto.			
	was filed on International Application and was amended on	on No.	, as United States A	application No. or PCT
	•		understand the contents of d by any amendment referred	
known		to the patentabil	nited States Patent Office all ity of this application in acc	
Section of any States, for part	n 365(b) of any foreign PCT international appl listed below and have	application(s) for lication which do also identified be ficate or PCT in	der Title 35, United States or patent or inventor's certification at least one country below, by checking the box, atternational application having med.	cate, or Section 365(a) other than the United any foreign application
Prior F	Foreign Application(s)			
	Number	Country	Day/Month/Year Filed	Priority Not Claimed

I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional application(s) listed below:

**Application Serial No.** 60/397,045

Filing Date
July 19, 2002

I hereby claim the benefit under 35 U.S.C. Section 120 of any United States application(s), or Section 365(c) of any PCT international application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, C.F.R., Section 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.

**Filing Date** 

Status (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

And I hereby appoint the practitioners at customer number: 29200

29200
PATENT TRADEMARK OFFICE

as my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith and direct that all correspondence be forwarded to:

Joseph P. Reagen, Esq. Corporate Counsel, Renal Division Baxter Healthcare Corporation One Baxter Parkway, DF3-3E Deerfield, IL 60015-4633

And all telephone calls be directed to: (847) 948-3315.

Full name of first or sole inventor				
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